Recipient Committee Campaign Statement Cover Page (Government Code Sections 84200-84216.5)	Type or print in	ink.		COVER PAGE ALIFORNIA 2001/02 FORM
SEE INSTRUCTIONS ON REVERSE	Statement covers period from 01-01-2004 through 06-30-2004	Date of election if applicable: (Month, Day, Year) REGISTRAR	OF VOTER	For Official Use Only
State Candidate Election Committee Recall (Also Complete Part 5) General Purpose Committee Sponsored Small Contributor Committee	inplete Parts 1, 2, 3, and 4, rimarily Formed Ballot Measure committee Controlled Sponsored Complete Part 6) Cimarily Formed Candidate/ Complete Part 7)	2. Type of Statement: Preelection Statement Semi-annual Statement Termination Statement (Also file a Form 410 Termination) Amendment (Explain below) amending method of reporting (Summary Page, Sched	Supplement - Statement - officeholder expense	d-Year Report tal Preelection Attach Form 495
a. Cummuee mormanon	949.252.8852	Treasurer(s) NAME OF TREASURER Lesley Ann Stoil MAILING ADDRESS CITY NAME OF ASSISTANT TREASURER, IF ANY MAILING ADDRESS	STATE ZIP CODE CA	area code/phone 408.370.9850
CITY STATE ZIP COL	DE AREA CODE/PHONE	OPTIONAL: FAX / E-MAIL ADDRESS	STATE ZIP CODE	AREA CODE/PHONE
I have used all reasonable diligence in preparing and reviewing under penalty of perjury under the laws of the State of California Executed on Date Executed on Date Executed on	that the foregoing is true and correct.	Signature of Controlling Officeholder, Candidate, State Measure Programmer Signature of Controlling Officeholder, Candidate, State Measure Programmer Programmer Controlling Officeholder, Candidate, State Measure Programmer Candidate, State Measure Programmer Controlling Officeholder, Candidate, State Measure Programmer Candidate, State Measure Candidate,	onsible Officer of Sponsor	ue and complete. I certify

FPPC Form 460 (January/05)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
State of California

Campaign Disclosure Statement Summary Page

Type or print in ink.

Amounts may be rounded to whole dollars.

SUMMARY PAGE

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Friends of Mike Carona

1.D. N

					1 30	1967	
Contributions Received		Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)		Column B CALENDAR YEAR TOTAL TO DATE	Calendar Year Summary for Candidates Running in Both the State Primary and		
1. Monetary Contributions Schedule A, Line 3	\$	0.00	\$		General Elections		
2. Loans Received Schedule B, Line 3		0.00		0.00	1/1 through 6/30	7/1 to Date	
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2	\$	0.00	\$	4	20. Contributions Received \$\$		
4. Nonmonetary Contributions Schedule C, Line 3		0.00			21. Expenditures		
5. TOTAL CONTRIBUTIONS RECEIVED	\$	0.00	\$		Made \$\$_		
Expenditures Made					Expenditure Limit Summary for S	State	
6. Payments Made Schedule E, Line 4	\$	51,048.34	\$		Candidates	Juic	
7. Loans Made Schedule H, Line 3		0.00		0.00			
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$	51,048.34	\$		22. Cumulative Expenditures (If Subject to Voluntary Expenditure	Made* Limit)	
9. Accrued Expenses (Unpaid Bills)Schedule F, Line 3		(5,000.00)		297.88	Date of Election To	otal to Date	
10. Nonmonetary Adjustment Schedule C, Line 3		0.00			(mm/dd/yy)		
11. TOTAL EXPENDITURES MADE	\$	46,048.34	\$		\$		
Current Cash Statement					\$		
12. Beginning Cash Balance Previous Summary Page, Line 16	\$	292,753.91	To .	calculate Column B, add			
13. Cash Receipts Column A, Line 3 above		0.00	am	ounts in Column A to the			
14. Miscellaneous Increases to Cash Schedule I, Line 4		1,403.29		responding amounts n Column B of your last	*Amounts in this section may be different fror reported in Column B.	m amounts	
15. Cash Payments Column A, Line 8 above		51,048.34	гер	ort. Some amounts in umn A may be negative	reported in Column B.		
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$	243,108.86	figu	res that should be			
If this is a termination statement, Line 16 must be zero.			per	tracted from previous od amounts. If this is			
17. LOAN GUARANTEES RECEIVED Schedule B, Part 2	\$	0.00	for	first report being filed this calendar year, only y over the amounts			
Cash Equivalents and Outstanding Debts				n Lines 2, 7, and 9 (if			
18. Cash Equivalents			l,	<i>'</i>			
19. Outstanding Debts Add Line 2 + Line 9 in Column B above	\$	297.88			FPPC Form 40 FPPC Toll-Free Helpline: 866/ASK-FPPC		

Schedule E Type or print in in Amounts may be rout to whole dollars.		be rounded		Statem	ent covers period 01-01-2004	CALIFO		
SEE INSTRUCTIONS ON REVERSE					through	06-30-2004	Page	3 or 4
NAME OF FILER							I.D. NUA	MBER
Friends of Mike Carona							961967	7
CODES: If one of the following of campaign paraphemalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary) CVC civic donations FIL candidate filing/ballot fees FND fundraising events independent expenditure supporting legal defense LT campaign literature and mailings	M M O Pl Pl P g/opposing others (explain)*	BR member con meetings ar FC office exper petition circum HO phone bank OL polling and OS postage, de	nmunications and appearance ases ulating s survey reseal livery and me	es	RAD radio RFD retur SAL cam, TEL t.v. c TRC canc TRS staff, TSF trans VOT vote	ibe the payment. a airtime and production med contributions paign workers' salaries or cable airtime and prod lidate travel, lodging, an (spouse travel, lodging, for between committee or registration mation technology costs	duction costs d meals and meals s of the sar	me candidate/sponsor
NAME AN (IF COMMITT	D ADDRESS OF PAYEE EE, ALSO ENTER I.D. NUMBER)		CODE	OR I	DESCRIPTION OF F	AYMENT		AMOUNT PAID
Michael Carona				officeholder e	xpenses			\$5,000.00
TOTAL PAYMENTS BEFORE TH	HIS AMENDMENT							\$46,048.34
* Payments that are contributions or	Independent expenditures mus	t also be sumn	arized on S	chedule D.		SL	BTOTAL\$	51,048.34
Schedule E Summary								
1. Itemized payments made this pe	eriod. (Include all Schedule E s	ubtotals.)		•••••		•••••	\$	51,048.34
2. Unitemized payments made this	•	•						
3. Total interest paid this period on	•						•	
4. Total payments made this period		•						51,048.34
The second secon				., . 250, 00,41111	,,			

Schedule F	Type or print in ink				SCHEDULE F	
Accrued Expenses (Unpaid Bills)	. 3 kg at letter at at the				CALIFORNIA 460	
SEE INSTRUCTIONS ON REVERSE NAME OF FILER			through 06-3	80-2004	Page 4 of 4	
Friends of Mike Carona			,	i.	Ü. NUMBER	
				ļg	61967	
CODES: If one of the following codes accurately described campaign paraphernalia/misc. CNS campaign consultants contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings	MBR member communication MTG meetings and appeara OFC office expenses PET petition circulating PHO phone banks POL polling and survey res POS postage, delivery and PRO professional services PRT print ads	nd production costs ibutions kers' salaries rtime and productionel, lodging, and meavel, lodging, and r	ction costs neals id meals of the same candidate/sponsor			
NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON I	BALANCE AT CLOSE	
Michael Carona	officeholder expenses	\$5,297.88	\$0.00	\$5,000.		
	·					
* Payments that are contributions or independent expenditures must also be summarized on Schedule D.	SUBTOTALS \$	5,297.88 \$	0.00 \$	5,000.0	0 \$ 297.88	
Schedule F Summary						
 Total accrued expenses incurred this period. (Include all Seaccrued expenses of \$100 or more, plus total unitemized a 	ccrued expenses under \$	3100.)	INCU	RRED TOTALS	\$0.00	
Total accrued expenses paid this period. (Include all Sche accrued expenses of \$100 or more, plus total unitemized p	dule F, Column (c) subtot ayments on accrued expe	als for payments on enses under \$100.)				
 Net change this period. (Subtract Line 2 from Line 1. Ento on the Summary Page, Column A, Line 9.) 	er the difference here and	1				